

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	7/15
O.I.P.E. CLASSIFIER			7-20-94
FORMALITY REVIEW	mm	71628	7-28-98

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/15/94
2	✓	✓	7/15/94
3	✓	✓	7/15/94
4	✓	✓	7/15/94
5	✓	✓	7/15/94
6	✓	✓	7/15/94
7	✓	✓	7/15/94
8	✓	✓	7/15/94
9	✓	✓	7/15/94
10	✓	✓	7/15/94
11	✓	✓	7/15/94
12	✓	✓	7/15/94
13	✓	✓	7/15/94
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48	✓	✓	7/15/94
49	✓	✓	7/15/94
50	✓	✓	7/15/94

Claim	Final	Original	Date
51	✓	✓	7/15/94
52	✓	✓	7/15/94
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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